				JIS	CODE: POD
STATE OF MICHIGAN PROBATE COURT COUNTY OF LEELANAU	PETITION	AND ORDER FOR	DISCOVERY	FILE NO.	
Estate of				, decedentX	
		PETITION		La	st four digits of SSN
I,					, represent that:
Name and relationship					_,
Decedent died on Date Date		A copy of the d	eath certificate i	s attached.	
2. Decedent was a resident of	City/Township			in this county.	
3. DESCRIPTION OF PROPERTY					
NAME OF FINANCIAL INSTITU INVESTMENT/BROKERAGE F	ACCOUNT NUMBER		NAME OR NAMES ON ACCT OR TITL		
4. I REQUEST that the financial in to the petitioner the account number account or title(s), both at the time. I declare under the penalties of perfect the penalties of perfect the penalties.	er(s), if unknown of the decedent jury that this pe	n, as well as the bala 's death and at the p	ance(s) in the accoresent time.	ccount(s) and/or na	me(s) on an
best of my information, knowledge	and belief.				
Date		F	Petitioner's Name (printed)		
Address		P	Petitioner's Signature		
City, state, zip code		Te	Telephone no.		
	OR	DER FOR DISCOV	ERY		
IT IS ORDERED that:					
Upon presentation of a certified copagency shall reveal to the petitione name(s) on the account or title(s), causing an assignment of deceden	r the account no both at the time	umber(s), if unknowi	n, the balance(s) of the account(s),	and/or the

Do not write below this line - For court use only

Hon. Larry J. Nelson

Date

P-24869